

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

OFFICIAL RECORD
CITY SECRETARY
FT. WORTH, TX

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

28

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Mr. Salvador

NICKNAME

LAST

SUFFIX

"Sal" Espino

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

1205 N. Main St.
Ft. Worth, TX 76164

☐ Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 624-3352

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Mrs. Elizabeth

NICKNAME

LAST

SUFFIX

Harris Espino

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

1205 N. Main St.
Ft. Worth, TX 76164

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(817) 624-3352

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☒ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

05 / 01 / 15

THROUGH

Month

Day

Year

06 / 30 / 15

11 ELECTION

ELECTION DATE

Month

Day

Year

05 / 09 / 15

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Fort Worth City
Council - District 2

13 OFFICE SOUGHT (if known)

Fort Worth City
Council - District 2

OFFICE USE ONLY

Date Received



Date Hand-delivered or Date Postmarked

Receipt #

Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

18,725.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,
UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

31,137.50

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$

14,752.21

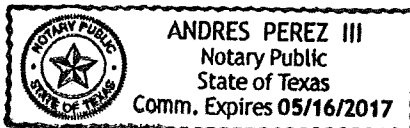
OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

4,000.00

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Salvador Espino

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said

Salvador Espino

this the

15th

day of *July*, 20 *15*, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

ANDRES PEREZ
Printed name of officer administering oath

Notary Public
Title of officer administering oath

SUBTOTALS - COH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Salvador "Sal" Espino

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,725.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 4,000.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 31,137.50
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1 of 5

2 FILER NAME

Salvador "Sal" Espino

3 Filer ID (Ethics Commission Filers)

4 Date

05/04/15

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Susan Smith

6 Contributor address;

City; State; Zip Code

7736 Fm 428
Denton, TX 76208

7 Amount of contribution (\$)

\$1,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/04/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

William Seger

Contributor address;

City; State; Zip Code

9250 Boat Club Rd
Ft. Worth, TX 76179

Amount of contribution (\$)

\$ 250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/04/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jerry Conatser

Contributor address;

City; State; Zip Code

6716 Saint Andrews Rd.
Ft. Worth, TX 76132

Amount of contribution (\$)

\$ 3,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/04/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mac Churchill

Contributor address;

City; State; Zip Code

611 Rivercrest Dr.
Ft. Worth, TX 76107

Amount of contribution (\$)

\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 of 5

2 FILER NAME

Salvador "Sal" Espino

3 Filer ID (Ethics Commission Filers)

4 Date

05/04/15

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Marlene Beckman

7 Amount of contribution (\$)

\$1,000.00

6 Contributor address: City: State: Zip Code

2300 Medford East
Ft. Worth, TX 76109

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/04/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

C. H. Crossley

Amount of contribution (\$)

\$200.00

Contributor address: City: State: Zip Code

P.O. Box 1117
Round Rock, TX 78680

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/04/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Merhdad Moayed

Amount of contribution (\$)

\$5,000.00

Contributor address: City: State: Zip Code

1800 Valley View Lane, Ste. 300
Farmers Branch, TX 75234

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/07/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charles M. Groomer

Amount of contribution (\$)

\$100.00

Contributor address: City: State: Zip Code

6324 Skylark Circle
Ft. Worth, TX 76180

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 5

2 FILER NAME

Salvador "Sal" Espino

3 Filer ID (Ethics Commission Filers)

4 Date

05/07/15

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jim Riskey

6 Contributor address; City; State; Zip Code

2314 Azle Ave.
Ft. Worth, TX 76164

7 Amount of contribution (\$)

\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

05/11/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Joe Paniagua

Contributor address; City; State; Zip Code

8125 Mount Shasta Circle
Ft. Worth, TX 76137

Amount of contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/14/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Meto Miteff

Contributor address; City; State; Zip Code

4453 Crestline Rd.
Ft. Worth, TX 76107

Amount of contribution (\$)

\$300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/09/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James D. Marchesano

Contributor address; City; State; Zip Code

11916 S. Grand Ave.
Tulsa, OK 74137

Amount of contribution (\$)

\$200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4 of 5

2 FILER NAME

Salvador "Sal" Espino

3 Filer ID (Ethics Commission Filers)

4 Date

06/15/15

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Edward P. Bass

7 Amount of contribution (\$)

\$1,500.00

6 Contributor address; City; State; Zip Code

201 Main St., Ste. 2700
Ft. Worth, TX 76102

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/17/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Gerald W. Haddock

Amount of contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

500 Main St., Suite 1015
Ft. Worth, TX 76102

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/17/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

James Oliver

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

Ft. Worth, TX

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

06/17/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Celina Vasquez

Amount of contribution (\$)

\$125.00

Contributor address; City; State; Zip Code

5020 Fall River Dr.
Ft. Worth, TX 76103

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

5 of 5

2 FILER NAME

Salvador "Sal" Espino

3 Filer ID (Ethics Commission Filers)

4 Date

06/17/15

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Kasey Pipes

6 Contributor address; City; State; Zip Code

2700 Country Club Cir.
Ft. Worth, TX 76109

7 Amount of contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

06/23/15

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Good Government Fund

Contributor address; City; State; Zip Code

201 Main St., Ste. 2500
Ft. Worth, TX 76102

Amount of contribution (\$)

\$3,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1 of 1

2 FILER NAME

Salvador "Sal" Espino

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 4,000.00

5 Date of loan

4/23/13

7 Name of lender

☐ out-of-state PAC (ID#: _____)

Richard Abrams

9 Loan Amount (\$)

\$4,000.00

6 Is lender a financial Institution?

Y ☒ N

8 Lender address;

City;

State;

Zip Code

6145 Wedgewood
Ft. Worth, TX 76133

10 Interest rate

6.0%

11 Maturity date

12/31/15

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ none

15 Check if personal funds were deposited into political account (See Instructions)

☐

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address;

City;

State;

Zip Code

☐ not applicable

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID#: _____)

Loan Amount (\$)

Is lender a financial Institution?

Y N

Lender address;

City;

State;

Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political account (See Instructions)

☐

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address;

City;

State;

Zip Code

☐ not applicable

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 19		2 FILER NAME Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date 05/01/15		5 Payee name Murphy Musica & Associates			
6 Amount (\$) \$3,697.29		7 Payee address; City; State; Zip Code 815-A Brazos St. Ste. 304 Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Materials	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/01/15		Payee name Murphy Musica & Associates			
Amount (\$) \$750.00		Payee address; City; State; Zip Code 815-A Brazos St. Ste. 304 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Polling Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Automated Poll	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/01/15		Payee name Stephanie Culver			
Amount (\$) \$975.00		Payee address; City; State; Zip Code 4200 Bridgeview Dr #1435 Ft. Worth, TX 76135			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Coordination	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/01/15	5 Payee name L. G. Saenz	
6 Amount (\$) \$1,700.00	7 Payee address; City; State; Zip Code 1204 Gould Ave. Ft. Worth, TX 76164	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Entertainment
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 05/04/15	Payee name Murphy Nalica & Associates	
Amount (\$) \$5,099.98	Payee address; City; State; Zip Code 815-A Brazos St Ste. 304 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 05/04/15	Payee name Pilar Candia	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2610 Goldenrod Ave. Ft. Worth, TX 76111	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage For Campaign Workers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 19		2 FILER NAME Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/15		5 Payee name Br. Harry Lucio			
6 Amount (\$) \$180.00		7 Payee address; City; State; Zip Code 3803 Ohio Garden Rd Ft. Worth, TX 76114			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/15		Payee name Marky Ramos			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 1817 Harrington Ave. Ft. Worth, TX 76114			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/15		Payee name Danny Ramos			
Amount (\$) \$120.00		Payee address; City; State; Zip Code 1817 Harrington Ave. Ft. Worth, TX 76164			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 19		2 FILER NAME Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/15		5 Payee name Paulina Paredes			
6 Amount (\$) \$200.00		7 Payee address; City; State; Zip Code 1315 Park St. Ft. Worth, TX 76164			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/15		Payee name Eunice Bustillos			
Amount (\$) \$220.00		Payee address; City; State; Zip Code 9000 Beacon Ct. Ft. Worth, TX 76140			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/15		Payee name Sara Medina			
Amount (\$) \$210.00		Payee address; City; State; Zip Code 2412 Inspiration Dr. Weatherford, TX 76087			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 19		2 FILER NAME Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/15		5 Payee name Remy Guzman			
6 Amount (\$) \$200.00		7 Payee address; City; State; Zip Code 2704 NW 21st Ft. Worth, TX 76106			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/15		Payee name Matthew Stiffle			
Amount (\$) \$240.00		Payee address; City; State; Zip Code 8000 Emerald Crest Dr. #142 Ft. Worth, TX 76108			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/15		Payee name Jordan Gauger			
Amount (\$) \$180.00		Payee address; City; State; Zip Code 3629 N. McGregor #102 Houston, TX 77004			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/04/15	5 Payee name Nadyah Diaby	
6 Amount (\$) \$160.00	7 Payee address; City; State; Zip Code 9440 Goldenview Dr. Keller, TX 76244	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contact Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 05/04/15	Payee name M. Kaela Gonzalez	
Amount (\$) \$120.00	Payee address; City; State; Zip Code 4221 Hardy St. Ft. Worth, TX 76106	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contact Labor	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date 05/04/15	Payee name Pilar Candia	
Amount (\$) \$82.91	Payee address; City; State; Zip Code 2610 Goldenrod Ave. Ft. Worth, TX 76111	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 19		2 FILER NAME Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/15		5 Payee name Ruben Sandoval			
6 Amount (\$) \$280.00		7 Payee address; City; State; Zip Code Ft. Worth TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense DJ Service	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/15		Payee name Sal Espino, Jr.			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 2017 Chestnut Ave. Ft. Worth, TX 76164			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contact Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/04/15		Payee name Leticia Sanchez			
Amount (\$) \$650.00		Payee address; City; State; Zip Code 5438 Wall Ave. Haltom City, TX 76117			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contact Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 19		2 FILER NAME Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date 05/04/15		5 Payee name Leticia Tepichin			
6 Amount (\$) \$650.00		7 Payee address; City; State; Zip Code 5938 Wall Ave. Hilton City, TX 76117			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contact Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/05/15		Payee name Murphy Nalica & Associates			
Amount (\$) \$364.72		Payee address; City; State; Zip Code 815-A Brazos St, Ste. 304 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Materials	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/05/15		Payee name Murphy Nalica & Associates			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 815-A Brazos St. Ste. 304 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 19		2 FILER NAME: Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date: 05/06/15		5 Payee name: Fernando's Catering			
6 Amount (\$): \$640.00		7 Payee address; City; State; Zip Code: 1009 Dusty Palomino Dr. Ft. Worth, TX 76179			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food/Beverage Expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date: 05/07/15		Payee name: Corporate Couriers			
Amount (\$): \$31.59		Payee address; City; State; Zip Code: 1101 W. 10th St. Ft. Worth, TX 76102			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Office Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Carrier fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date: 05/11/15		Payee name: Pedro Juarez			
Amount (\$): \$245.00		Payee address; City; State; Zip Code: 2610 Goldenrod Ave. Ft. Worth, TX 76111			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/11/15	5 Payee name Kathy Espino	
6 Amount (\$) \$59.06	7 Payee address; City; State; Zip Code 4920 Robinson St. Ft. Worth, TX 76114	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Campaign Workers
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 05/11/15	Payee name Pilar Candia	
Amount (\$) \$164.21	Payee address; City; State; Zip Code 2610 Goldenrod Ave. Ft. Worth, TX 76111	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Expense	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplier
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 05/11/15	Payee name Leticia Sanchez	
Amount (\$) \$650.00	Payee address; City; State; Zip Code 5438 Wall Ave. Haltom City, TX 76117	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 11 of 19		2 FILER NAME Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date 05/11/15		5 Payee name Leticia Tepichin			
6 Amount (\$) \$650.00		7 Payee address; City; State; Zip Code 5938 Wall Ave. Haltom City TX 76117			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

Date 05/11/15		Payee name Mikaela Gonzalez			
Amount (\$) \$240.00		Payee address; City; State; Zip Code 4221 Hardy St. Ft. Worth, TX 76106			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

Date 05/11/15		Payee name Matthew Stiffle			
Amount (\$) \$380.00		Payee address; City; State; Zip Code 8000 Emerald Crest Dr. #142 Ft. Worth, TX 76108			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 12 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/11/15	5 Payee name Jordan Ganger	
6 Amount (\$) \$260.00	7 Payee address; City; State; Zip Code 3624 N. MacGregor #102 Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date 05/11/15	Payee name Sara Medina
Amount (\$) \$380.00	Payee address; City; State; Zip Code 2912 Inspiration Dr. Weatherford, TX 76087
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor
	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

Date 05/11/15	Payee name Nadyah Diaby
Amount (\$) \$240.00	Payee address; City; State; Zip Code 9440 Goldenview Dr. Keller, TX 76244
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor
	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/11/15	5 Payee name Dr. Harry Lucio	
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 3803 Ohio Garden Rd. Ft. Worth, TX 76114	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 05/11/15	Payee name Danny Ramos	
Amount (\$) \$160.00	Payee address; City; State; Zip Code 1817 Harrington Ave. Ft. Worth, TX 76164	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 05/11/15	Payee name Eunice Bustillos	
Amount (\$) \$390.00	Payee address; City; State; Zip Code 9000 Beacon Ct. Ft. Worth, TX 76140	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 14 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/11/15	5 Payee name Minky Ramos	
6 Amount (\$) \$260.00	7 Payee address; City; State; Zip Code 1817 Hanningston Ave. Ft. Worth, TX 76164	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 05/11/15	Payee name Paulina Paredes	
Amount (\$) \$340.00	Payee address; City; State; Zip Code 1315 Park St. Ft. Worth TX 76164	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 05/11/15	Payee name Remy Guzman	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 2704 NW 21st Ft. Worth, TX 76106	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 15 of 19		2 FILER NAME Salvador "Sal" Espino		3 Filer ID (Ethics Commission Filers)	
4 Date 05/11/15		5 Payee name Carmen Zacarias			
6 Amount (\$) \$252.00		7 Payee address; City; State; Zip Code 2714 NW 30th St. Ft. Worth, TX 76106			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/11/15		Payee name Carla Cisneros			
Amount (\$) \$310.00		Payee address; City; State; Zip Code 2340 Linda Lane Ft. Worth, TX 76119			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 05/11/14		Payee name Abel Martinez / Texas Soulbeats			
Amount (\$) \$350.00		Payee address; City; State; Zip Code Ft. Worth, TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Entertainment	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 16 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/11/15	5 Payee name Fort Worth Hispanic Chamber of Commerce	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1327 N. Main St. Ft. Worth, TX 76164	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 05/14/15	Payee name Elizabeth Espino	
Amount (\$) \$141.35	Payee address; City; State; Zip Code 1205 N. Main St. Ft. Worth, TX 76164	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 05/15/15	Payee name Fort Worth Vaqueros Soccer Club	
Amount (\$) \$240.00	Payee address; City; State; Zip Code 599 Collins St. Ft. Worth, TX 76103	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship / Season Tickets
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 17 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/20/15	5 Payee name Murphy Musica & Associates	
6 Amount (\$) \$74.39	7 Payee address; City; State; Zip Code 815-A Bruzos St. Ste. 301 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Shipping
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 05/21/15	Payee name Righteous Branch Ministries	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1500 Circle Park Blvd. Ft. Worth, TX 76164	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 05/28/15	Payee name Leticia Sanchez	
Amount (\$) \$650.00	Payee address; City; State; Zip Code 5938 Wall Ave. Haltom City, TX 76117	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign work
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 05/28/15	5 Payee name Leticia Tepichin	
6 Amount (\$) \$650.00	7 Payee address; City; State; Zip Code 5438 Wall Ave. Haltom City, TX 76117	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign work
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 06/13/15	Payee name La Ligan del Norte Beisbol	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 701 N. University Dr. Ft. Worth, TX 76114	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

Date 06/18/15	Payee name MANO (Men Advancing New Opportunities)	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 2312 Goldenrod Ft. Worth, TX 76111	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 19 of 19	2 FILER NAME Salvador "Sal" Espino	3 Filer ID (Ethics Commission Filers)
4 Date 06/19/15	5 Payee name For Greater Northside Historical N. A.	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 2902 Lulu St. Ft. Worth, TX 76106	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought
		Office held

Date 06/25/15	Payee name Pilar Candia	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2610 Goldenrod Ft. Worth, TX 76111	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Work
Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought
		Office held

Date 06/30/15	Payee name Richard Abrams	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6145 Wedgewood Ft. Worth, TX 76133	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Installment Payment
Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought
		Office held

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